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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	LIT-PI-316
	First Named Inventor	Daniel E. Wessol
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS AND COMPUTER READABLE MEDIUM FOR IMPROVED RADIOTHERAPY DOSIMETRY PLANNING

the specification of which (Title of the Invention)

☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/191,079	03/21/00

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Michael W.

Frandsen

Inventor's
Signature

Date

Residence: City

Helena

State

MT

Country

US

Citizenship

US

Post Office Address

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Post Office Address

City

Helena

State

MT

ZIP

59601

Country

US

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Floyd J.

Wheeler

Inventor's
Signature

Date

3/19/01

Residence: City

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State

ID

Country

US

Citizenship

US

Post Office Address

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Post Office Address

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State

ID

ZIP

83221

Country

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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

David W.

Nigg

Inventor's
Signature

Date

3/19/01

Residence: City

Idaho Falls

State

ID

Country

US

Citizenship

US

Post Office Address

3170 Tipperary Lane

Post Office Address

City

Idaho Falls

State

ID

ZIP

83404

Country

US

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DECLARATION — Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Stephen R. Christian	32,687		
Alan D. Kirsch	33,720		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

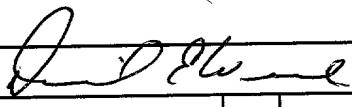
OR ☒ Correspondence address below

Name	Stephen R. Christian				
Address	Bechtel BWXT Idaho, LLC				
Address	P. O. Box 1625				
City	Idaho Falls	State	ID	ZIP	83415-3899
Country	US	Telephone	208-526-9140	Fax	208-526-8339

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Daniel E.	Wessol

Inventor's Signature				Date	3/21/01
Residence: City	Bozeman	State	MT	Country	US
Post Office Address	3150-10 Graf Street				
Post Office Address					
City	Bozeman	State	MT	ZIP	59715
				Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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Given Name (first and middle [if any])		Family Name or Surname			
Michael W.		Frandsen			
Inventor's Signature	<i>Michael W. Frandsen</i>			Date	3-16-2001
Residence: City	Helena	State	MT	Country	US
Post Office Address	2612 Gold Rush Avenue				
Post Office Address					
City	Helena	State	MT	ZIP	59601
Country	US				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Floyd J.		Wheeler			
Inventor's Signature				Date	
Residence: City	Idaho Falls	State	ID	Country	US
Post Office Address	1405-6 Presto Street				
Post Office Address					
City	Idaho Falls	State	ID	ZIP	83402
Country	US				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
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David W.		Nigg			
Inventor's Signature				Date	
Residence: City	Idaho Falls	State	ID	Country	US
Post Office Address	3170 Tipperary Lane				
Post Office Address					
City	Idaho Falls	State	ID	ZIP	83404
Country	US				

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Address	P. O. Box 1625				
City	Idaho Falls	State	ID	ZIP	83415-3899
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